Effective on 12/08/2004.				Γ	Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).									
FEE TRANSMITTAL					ation Number	10/534,07			
For FY 2009				Filing Date 11/14/2005					
TOT 1 2007				First Named Inventor		Mark Theodoor Verhaar Sara E. Clark			
Applicant claims small entity status. See 37 CFR 1.27				Examiner runte		1612	aik		
TOTAL AMOUNT OF PAYMENT (\$) 130,00				Art Unit 1612 Attorney Docket 0470 - 05			1400		
TOTAL AMOUNT OF PAYMENT (\$) 130.00					Attorney Docket 0470 - 031409				
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES									
Small Entity Small						Small Entity			
Application Type Fee (\$) Fee (\$) Fee (\$)			ee (\$)	<u>Fee (\$)</u> <u>Fee (\$)</u>		Fees Paid (\$)			
Utility	330	82	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description Fee (\$)								Fee (\$)	
Each claim over 20 (including Reissues) 52								26	
Each independent claim over 3 (including Reissues)								110	
Multiple dependent cla			_		T D 11(0)		390	195	
<u>Total Claims</u> - 2	20 or HP Extra Claims Fee (Fee Paid (\$)				pendent Claims Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims - 3	or HP	Extra Claims	Fee	(\$)	Fee Paid (\$)				
indep. Clamis = 3	=	Extra Ciamiş	X Fee	= 7क1	<u>rec i μα (ψ)</u>				
HP = highest number of	independent clain	ns paid for, if great							
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.									
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid</u>									
4. OTHER FEE(S)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Petition for One-Month Extension of Time								130.00	
SUBMITTED BY /									
Signature	Wint	14 1	olen		egistration No.		Telephone 41	2-471-8815	
Nama (Print/Tyna)								ber 27, 2010	